



**MARYLAND STATE FIRE MARSHAL
FIRE SPRINKLER CONTRACTOR
LICENSE APPLICATION**



CHECK ONE: ☐ NEW APPLICATION
☐ RENEWAL - PRESENT LICENSE NO. _____
☐ TEMPORARY *(Note: Period for all temporary licenses shall not exceed July 1, 2005)*

SUBMIT APPLICATION AND FEE TO:
OFFICE OF THE STATE FIRE MARSHAL
201 Baptist Street, Suite 17
Salisbury, MD 21801

FOR INFORMATION CONTACT:
OFFICE OF THE STATE FIRE MARSHAL
201 Baptist Street, Suite 17
Salisbury, MD 21801
410-543-6573 FAX: 410-219-2829
Website: <http://firemarshal.state.md.us>

PLEASE TYPE OR PRINT CLEARLY

1. APPLICANT NAME: _____
POSITION / TITLE: _____
BUSINESS NAME: _____
BUSINESS ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
MAILING ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
TELEPHONE: _____ FAX: _____
E-MAIL ADDRESS: _____

2. CLASS OF LICENSE APPLICATION: [*Check Applicable Class(es)*]
- ☐ CLASS I Inspection, testing and maintenance only; NFPA 13, 13D, & 13R Systems
 - ☐ CLASS II a Installation, repair, modification only; NFPA 13D & 13R Systems only
 - ☐ CLASS II b Layout only; NFPA 13D & 13R Systems only
 - ☐ CLASS II c Installation, repair, modification and layout; NFPA 13D & 13R Systems only
 - ☐ CLASS III a Installation, repair, modification only; NFPA 13, 13D & 13R Systems
 - ☐ CLASS III b Layout only; NFPA 13, 13D & 13R Systems
 - ☐ CLASS III c Installation, repair, modifications and layout; NFPA 13, 13D & 13R Systems

3. NAME OF "DESIGNATED QUALIFIED INDIVIDUAL": _____
Check respective qualification(s) to meet above Class of License. Attach a copy of NICET certification and/or Professional Engineer Registration/License. If more than one individual, include this information on a separate sheet and attach to this application.
- ☐ NICET ENGINEERING TECHNICIAN LEVEL II CERTIFICATION
in field of Fire Protection: Inspection and Testing of Water-Based Systems
 - ☐ NICET ENGINEERING TECHNICIAN LEVEL II EXAMINATION
in field of Fire Protection: Automatic Sprinkler System Layout
 - ☐ NICET ENGINEERING TECHNICIAN LEVEL II CERTIFICATION
in field of Fire Protection: Automatic Sprinkler System Layout
 - ☐ NICET ENGINEERING TECHNICIAN LEVEL III CERTIFICATION
in field of Fire Protection: Automatic Sprinkler System Layout
 - ☐ MARYLAND REGISTERED PROFESSIONAL ENGINEER

YEARS OF EXPERIENCE: _____

Note: Attach supporting documentation of NICET or Professional Engineer qualifications
Fire Sprinkler Contractor License Application (Continued)

4. NAME OF LIABILITY INSURANCE COMPANY: _____

POLICY NUMBER AND EXPIRATION: _____

*Note: Attach copy of minimum \$1,000,000.00 comprehensive general liability certificate of insurance.
The Office of the Maryland State Fire Marshal must be named as the certificate holder.*

5. REQUIRED FEE TO BE ENCLOSED: \$100.00

MAKE CHECKS PAYABLE TO: MARYLAND STATE FIRE MARSHAL'S OFFICE

6. Have you, the applicant or contractor, ever been denied a sprinkler contractor's license in another State or local jurisdiction or have had disciplinary action taken against such license? _____

If yes, please indicate the name of the jurisdiction, date of denial or disciplinary action, and the nature and disposition of the action taken: _____

7. Have you, the applicant, contractor or any employee of the contractor or applicant ever been convicted of any felony or misdemeanor violation of the State Fire Code or the fire code of any other State or the District of Columbia? _____

If yes, please indicate the name of the jurisdiction, date of conviction, and the nature and penalty imposed: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

RETURN NOTARIZED APPLICATION AND FEES TO THE OFFICE OF THE STATE FIRE MARSHAL

I HEREBY CERTIFY that on this _____ day of _____, 20____, before me, the subscriber, a Notary Public of the State of Maryland, in and for the County of _____, aforesaid, personally appeared _____ . The foregoing applicant, and made oath in due form of the law that answers in the foregoing application are full, complete, correct and true to the best of their knowledge, information and belief.

In witness whereof I hereunto set my hand and official seal.

(S E A L)

NOTARY PUBLIC

My Commission Expires: _____

WARNING: ANY PERSON WHO WILLFULLY MAKES A FALSE STATEMENT ON THIS APPLICATION IS GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE OF NOT MORE THAN \$1,000.00 OR IMPRISONMENT NOT EXCEEDING THREE (3) YEARS, OR BOTH.

FOR OFFICE OF STATE FIRE MARSHAL USE ONLY

() APPROVED LICENSE NUMBER _____ EXPIRATION DATE _____

() DISAPPROVED REASON FOR DISAPPROVAL _____

AUTHORIZED SIGNATURE _____ DATE _____

PAID AMOUNT _____ CD REF# _____